

The Commonwealth of Massachusetts, Department of Mental Health

Mandatory Forensic Review

Policy # 00-1

Date of Issue: January 5, 2000

Effective Date: January 6, 2000

Approval by Commissioner

Signed by: Marylou Sudders

Date: January 5, 2000

I. Purpose of Policy:

This policy establishes the criteria and process for referring a patient for a Mandatory Forensic Review (MFR) prior to granting certain levels of privileges and/or discharging certain patients with histories of violence related to specific serious criminal charges or hospitalization at Bridgewater State Hospital. The Division of Forensic Mental Health (DFMH), through MFRs, will provide risk assessments and recommendations for appropriate risk management to aid Treatment Teams in making decisions concerning granting of certain privileges and discharge. This policy repeals and replaces Policy #94-4.

II. Scope of Policy:

This policy applies to DMH-operated and contracted adult inpatient facilities, units and beds.

III. Definitions

- Facility: An adult inpatient hospital, unit or bed contracted for or operated by DMH, including DMH-operated units in a Department of Public Health hospital.
- Division of Forensic Mental Health (DFMH): The program division within the Department of Mental Health responsible for services to the criminal justice system and to people with mental illness involved with the criminal justice system.
- Forensic Consultant: A forensic clinician appointed by the DMH Assistant Commissioner for Forensic Mental Health to perform a MFR or elective consultation according to this policy.
- Patient: A patient in a Facility other than an individual committed for evaluation pursuant to M.G.L. c. 123, § § 15(b), 15(e), 15(f), 16(a) or 18. However, "Patient" shall include such an individual if the individual is later committed for treatment.
- Referral Completion Date: The day on which the Screener determines that all of the information required in conjunction with a Referral Form has been received by the DFMH.
- Referral Form: A form developed by the DFMH and the Area Medical Directors, reviewed by the Division of Clinical and Professional Services, and approved by the DFMH to be used by a Treatment Team to request a MFR or elective consultation.
- Screener: A forensic clinician appointed by the DMH Assistant Commissioner for Forensic Mental Health to review each Referral Form to determine whether or not a MFR will be conducted.
- Senior Reviewer: A Forensic Mental Health Supervisor, appointed by the DMH Assistant Commissioner for Forensic Mental Health pursuant to 104 CMR 33.04(4), to review and provide comment on all MFR reports.
- Treatment Team: The multidisciplinary clinical team responsible for the care and treatment of the patient referred for a MFR.

IV. Policy

A. Overview

The MFR process establishes an added level of clinical review for forensic patients determined to be at the highest risk of engaging in behaviors that could cause significant harm to others, before those patients are granted certain privileges or discharged. However, the treating psychiatrist, as a member of the Treatment Team, retains the ultimate responsibility and authority for granting privileges, discharging or determining the appropriate level of supervision for all patients.

B. Criteria for Referral to DFMH

1. Mandatory Referral/Mandatory Review.

- a. The Treatment Team must refer a Patient for a MFR whose period of

hospitalization/incarceration originated with one of the charges listed below:

- i. Murder
 - ii. Manslaughter
 - iii. Kidnapping
 - iv. Rape
 - v. Mayhem
 - vi. Assault & Battery with Intent to Murder
 - vii. Assault & Battery with Intent to Rape
 - viii. Assault & Battery with Intent to Maim
 - ix. Assault with Intent to Murder
 - x. Assault with Intent to Rape
 - xi. Assault with Intent to Maim
 - xii. Indecent Assault & Battery
 - xiii. Arson of a Dwelling
 - xiv. Stalking
 - xv. Any Sexual Offense that Subjects the Patient to the Responsibilities Enumerated under the Sex Offender Registry Law (MGL c. 6, § 178C-P).
 - b. A MFR will be conducted for each Patient referred in this category.
2. Mandatory Referral/Discretionary Review:
- a. The Treatment Team must refer a Patient for a MFR if the patient's current uninterrupted period of hospitalization/ incarceration includes a period of commitment to Bridgewater State Hospital for treatment pursuant to MGL c. 123, § 16(b), § 16(c), § 18 or § 7 & 8, as distinguished from a stay at Bridgewater State Hospital for evaluation pursuant to MGL c. 123, § 15(b), § 15(e), § 18(a) or § 16(a).
 - b. The DFMH will determine whether or not a MFR will be conducted for a Patient referred in this category.
- C. When to Submit a Mandatory Referral
1. The Treatment Team must submit a referral for a patient who meets the criteria in Part IV. B. 1. and 2. of this policy before granting:
 - a. supervised off-grounds privileges
 - b. unsupervised privileges, either on or off-grounds
 - c. discharge from the hospital
 2. The Treatment Team is not required to make a referral at the point the patient is being considered for:
 - a. supervised medical visits off grounds
 - b. other urgent situations that may arise (e.g., family funerals, etc.)
 - c. supervised privileges inside the hospital or on the hospital grounds
 3. MFR Referral Process and Response Time
 - a. The Treatment Team must submit a MFR Referral Form to DFMH at least 30 business days before the planned privilege upgrade or discharge date.
 - b. If the referral to DFMH does not include all necessary information, the Screener within five business days of the Referral Form being submitted shall notify the Treatment Team as to what is missing. If the required information is not received by DFMH within 20 additional business days, the case will be closed and the Treatment Team will be required to submit a new MFR referral.
 - c. If the patient being referred to DFMH is in the Mandatory Referral/ Discretionary Review category, the Screener will notify the Treatment Team, in writing, within five business days of the Referral Completion Date, if it is not necessary to conduct a MFR. At the same time, the Screener also will notify the Treatment Team, in writing, if a future referral for a MFR for the patient is necessary.
 - d. The final written report of the Forensic Consultant who conducted the MFR and the letter from the Senior Reviewer will be completed and sent to the Treatment Team within 25 business days of the Referral Completion Date.

V. Implementation Responsibility

The chief operating officer of a Facility or the director of a contracted unit within a Facility and the Assistant Commissioner for Forensic Mental Health are jointly responsible for implementing this policy.

VI. Review

This policy shall be reviewed at least every three years.

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